

Physician Counseling Documentation Form

This form is to serve as documentation that _____, an employee/member of Prince George, Virginia Fire & EMS has been advised of the results of laboratory testing that was performed on _____. This laboratory work was performed for the purpose of:

_____ Post-exposure medical follow-up

_____ Annual physical exam

_____ Post-hiring physical examination

Appropriate counseling was provided to this employee/member and all test results will remain confidential. A copy of the results will be held in his/her confidential medical record.

Physician Signature

Member Signature